

CLAIMS ONLY

Application Number

10073859

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1					
2		1				
3	1					
4		1				
5		1				
6		1				
7		1				
8		1				
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49						
50						
Total Indep.	7					
Total Depend.	20					
Total Claims	27					

	Indep	Depend	Indep	Depend	Indep	Depend
51						
52						
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99						
100						
Total Indep.						
Total Depend.						
Total Claims						